19/10/22, 22, 41

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000359645 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SACONSA GROUP LLC

Account Number: I20200000187 Phone : (786)757-2436 Fax Number : (786)513-5977

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

0	Address:			
DINGTI	Address.	 	 	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ECOTOOLS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 20 2022

K. Brumbley

H220003596453

From: JESUS LEON

H220003596453

## COVER LETTER

TO:	Registration Sec Division of Corp			1
	ECOTOOL	SLLC	• .	:
SUBJE	CT:	Name of Limi	ted Liability Company	<del></del> .
		Amendment and fec(s) are sub- ndence concerning this matter		
		JESUS LEON		
			Name of Person	
		SACONSA GROUP LLC		
			Firm/Company	
		3625 NW 82 Avenue Se	uite 100-K	
	•		Address	
		DORAL, FL 33166		
			City/State and Zip Code	
		JESUSLEONTERAN@G		
			to be used for future annual report notifi	cation)
For fun	ther information c	oncerning this matter, please e	alt:	
JESU!	S LEON		786 7572436	
	Name o	i Person	Area Code Daysime	Telephone Number
Enclose	ed is a check for th	he following amount:		
■ \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Page: 6 of 8

H220003596453

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECOTOOLS LLC			
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)		
The Articles of Organization for this Limited Liability Comp Florida document number <u>L22000195832</u>	any were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
The new name must be distinguishable and contain the words "Limited I	inbility Company," the designation "LLC" or the ab	breviation "L.L.C."	<b></b>
Enter new principal offices address, if applicable:			_
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		<u></u>
Enter new mailing address, if applicable:			<del></del>
(Mailing address MAY BE A POST OFFICE BOX)			_
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		the name of the 022 OC	e new
Name of New Registered Agent:		<u> </u>	— <u>—</u> ——————————————————————————————————
New Registered Office Address:			
•	Enter Florida stron address		
•	, Florida		
	City	Zip Code 🕹	
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</u>	٠	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	plete performance of my duties, and I am j as provided for in Chapter 605, F.S. Or,	familiar with and if this document	1

If Changing Registered Agent, Signature of New Registered Agent

From: JESUS LEON

H220003596453
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

MGR = Manager AMBR = Authorized Member

or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Femandez Zapelli, Diego J	3625 NW 82ND AVE	<b>_</b> Adḍ
		SUITE 100 K	□ Remove
		DORAL, FL 33166	☐ Change
			□ Add
			C Remove
			☐ Change
			Add
			□ Remove
		·	□ Change
			Remove
			Change
			□ A6d
			☐ Remove
			☐ Change
			D Add
			☐ Remove
			Change

2022-10-20 02:46:28 GMT

Page: 8 of 8

17865135977

-							
_							
•		-		- 47	***************************************	· · · · · · · · · · · · · · · · · · ·	:
-				-^			<del></del>
-		<del></del>			<del></del>		•
			·				•
		<del></del>				· · · · · · · · · · · · · · · · · · ·	
•							
				·· <del>····</del>		· · · · · · · · · · · · · · · · · · ·	
		<del></del> .					<del>,</del>
				<u>.</u>	<del></del> .		
							<del></del>
•				•			
	•		····				<del></del>
Note:	tive date, if other than the da flective date is listed, the date must be If the date inserted in this block ment's effective date on the Department.	does not me	et the applica	o date of filing ar ble statutory fili	more than 90 days ng requirement	optional) saffer filing.) Pursua s, this date will-no	ni to 605,0207 t be listed as
	ecord specifies a delayed e e 90th day after the recor		ite, but not	an effective	time, at 12:	01 a.m. on the	earlier of
Dated	OCTOBER 18		2022				,
		(	48	<u> </u>			٠
				ized representati			

Page 3 of 3

Filing Fee: \$25.00